MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

SERIAL NO. 10/587/63 APPLICANT(S)

FILING DATE

(FOR USE WITH FORM PTO-875)

CLAIMS

			ĀĒ	TED	A TIME		CLAIMS			·				
	AS FILED		AFTER 1*AMENDMENT		AFTER 2 MAMENDMENT				AS FILED		AFTER 1"AMENDMENT		AFTER 2 ** AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	j	_	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	ļ	<u> </u>		 			51						11.12.	DEI.
2		 	 	 	<u> </u>		52					1		
4	 	 		├- /	[53							
5	 	-	 	 - - 		· .	54							
6			 	 - 			55							
7				 - 			50				<u> </u>			
- 8			†	 			57 58				[ļ		ļ
9				1			59					 		
10							60							
11			1				61	十				 		
12	L						62	一						
13							63							
14 15							64							
16			 				65	\Box						
17							66	_						
18							67							
19						_ ·	68					_ · · · · ·		
20							69 70	+						
21							$\frac{-70}{71}$	+					_	
22							$\frac{72}{72}$	_						
23							73	┪						
24							74	1						
25 26							75							
27							76							
28	-						. 77	_						
29			 				78	4						
30							79 80							
31							81	-1-	 -					
32							82	┰						
33							83	+						
34 35							84	1				<u> </u>		
36							85				7			
37							86	\perp						
38							87	丄						
39				}			88	4						
40				f			89	╌		J.				
41							90 91	╅						
42							92	+						———İ
43							93	十		 f				
44							94	1				<u>-</u> -		
45 46							95	T						
47	 -			<u> </u> _			96	I						
48		<u> </u> -		—— <u>İ</u> -			97	I						
49							98	\bot						
50							99	1_						
TOTAL							100	4_	_					
IND.		▼	2	▼		4	TOTAL IND.	1				1		L
TOTAL DEP.	•	-	// .	(-		(=	TOTAL DEP.	十			J 	Ľ ŀ		_
TOTAL CLAIMS	Ŷ		13				TOTAL CLAIMS	1						
PTO - 1360 (F	REV. 11/04)								U.S Pat	DEPARTM	MENT of CO	MMERCE		